May 6, 2003

Re: MDR #: M2-03-0452-01 IRO Certificate No.: 5055

In accordance with the requirement for TWCC to randomly assign cases to IROs, TWCC assigned your case to \_\_\_\_ for an independent review. \_\_\_ has performed an independent review of \_\_\_ reviewed relevant medical records, any documents provided by the parties referenced above, and any documentation and written information submitted in support of the dispute.

The independent review was performed by a matched peer with the treating health care provider. Your case was reviewed by a physician who is Certified in Chiropractic Medicine.

# Clinical History:

This male claimant injured his foot in a work-related injury on \_\_\_\_. He sustained a crushing foot injury that resulted in a fracture in the tarsal/metatarsal region. On 10/03/02, a neuromuscular electrical stimulator (NMES) was prescribed with goals of pain control, muscle reeducation/strengthening, and reduction of edema.

### Disputed Services:

Neuromuscular electrical stimulator (NMES).

# **Decision**:

The reviewer disagrees with the determination of the insurance carrier. The reviewer is of the opinion that the NMES is medically necessary in this case.

#### Rationale for Decision:

It is understood from the medical documentation provided that the patient was utilizing a NMES as an integral part of a home rehabilitation program with goals as stated in "Clinical History". Documentation on 08/16/02 stated that the patient showed a 20-30% reduction in pain complaints after the use of the NMES.

Medical literature is clear that the NMES is a tool that will allow pain relief, reduction of edema, and muscle strengthening when utilized in the appropriate context in a rehabilitative program

#### Clinical References:

- Clinical Practice Guidelines for Chronic Non-Malignant Pain Syndrome Patients II: An Evidence-Based Approach. <u>J. Back</u> <u>Musculoskeletal Rehabil.</u>, 1999, Jan 1, 13: 47-58
- Lake, D.A., Neuromuscular Electrical Stimulation. An Overview of Its Application in the Treatment of Sports Injuries. Sports Med., 1992, May, 13(5): 320-336

 W. Man, I.O., Lepar G.S., Morrissey, M.C., Cywinski, J.K., Effect of Neuromuscular Electrical Stimulation on Foot/Ankle Volume During Standing. Med. Sci. Sports Exerc., 2003, Apr., 35(4): 630-634.

I am the Secretary and General Counsel of \_\_\_\_ and I certify that the reviewing physician in this case has certified to our organization that there are no known conflicts of interest that exist between him and any of the treating physicians or other health care providers or any of the physicians or other health care providers who reviewed this care for determination prior to referral to the Independent Review Organization.

We are simultaneously forwarding copies of this report to the payor and the Texas Workers' Compensation Commission. This decision by \_\_\_\_ is deemed to be a Commission decision and order.

### YOUR RIGHT TO REQUEST A HEARING

Either party to this medical dispute may disagree with all or part of this decision and has a right to request a hearing.

If disputing a spinal surgery prospective decision a request for a hearing must be in writing and it must be received by the TWCC Chief Clerk of Proceedings within ten (10) days of your receipt of this decision (28 Tex. Admin. Code 142.5©).

If disputing other prospective medical necessity (preauthorization) decisions a request for a hearing must be in writing and it must be received by the TWCC Chief Clerk of Proceedings within twenty (20) days of your receipt of this decision (28 Tex. Admin. Code 148.3).

This Decision is deemed received by you **five (5) days** after it was mailed (28 Tex. Admin. Code 102.4(h) or 102.5 (d)). A request for a hearing should be sent to:

Chief Clerk of Proceedings Texas Workers' Compensation Commission P.O. Box 40669 Austin, TX 78704-0012

A copy of this decision should be attached to the request. The party appealing the decision shall deliver a copy of its written request for a hearing to all other parties involved in the dispute.

I hereby verify that a copy of this Independent Review Organization (IRO) Decision was sent to the carrier, the requestor and claimant via facsimile or U.S. Postal Service from the office of the IRO on May 6, 2003.

Sincerely,